

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)**USE FEC MAILING LABEL
OR TYPE OR PRINT**Example: If typing, type
over the lines

ORRINPAC

ADDRESS (number and street)

175 S. WEST TEMPLE, SUITE 650

☐Check if different
than previously
reported. (ACC)

SALT LAKE CITY

UT

84101

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00235572

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☐April 15
Quarterly Report(Q1)☐July 15
Quarterly Report(Q2)☐October 15
Quarterly Report(Q3)☐January 31
Quarterly Report(YE)☐July 31 Mid-Year
Report(Non-election
Year Only) (MY)☐Termination Report
(TER)(b) Monthly
Report
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)
(Non-Election
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)
(Non-Election
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☒

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day
PRE-Election
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the
State of(d) 30-Day
Post-Election
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the
State of

5. Covering Period

09

01

2009

through

09

30

2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

STANLEY R. DE WAAL

Signature of Treasurer

Electronically Filed by STANLEY R. DE WAAL

Date

10

19

2009

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office
Use
Only**FEC FORM 3X**
(Rev. 12/2004)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 15

Write or Type Committee Name
 ORRINPAC

Report Covering the Period: From: M M
0 9 D D
0 1 Y Y Y Y
2 0 0 9 To: M M
0 9 D D
3 0 Y Y Y Y
2 0 0 9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2 0 0 9		146667.45
(b) Cash on Hand at Beginning of Reporting Period	30080.66	
(c) Total Receipts (from Line 19)	36250.00	123017.84
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	66330.66	269685.29
7. Total Disbursements (from Line 31)	8745.88	212100.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	57584.78	57584.78
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
 999 E street, NW
 Washington, DC 20463

Toll Free 800-424-9530
 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

ORRINPAC

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	9	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	9	3	0	2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	11250.00	35550.00
(ii) Unitemized	0.00	7631.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)	11250.00	43181.50
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	25000.00	79500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	36250.00	122681.50
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	336.34
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	36250.00	123017.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36250.00	123017.84

DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)			
(i) Federal Share.....	0.00	0.00	
(ii) Non-Federal Share.....	0.00	0.00	
(b) Other Federal Operating Expenditures.....	8745.88	135100.51	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	8745.88	135100.51	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	60000.00	
24. Independent Expenditure (use Schedule E)	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00	
26. Loan Repayments Made.....	0.00	0.00	
27. Loans Made.....	0.00	0.00	
28. Refunds of Contributions To:			
(a) Individuals/Persons Other Than Political Committees	0.00	0.00	
(b) Political Party Committees	0.00	0.00	
(c) Other Political Committees (such as PACs)	0.00	0.00	
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00	
29. Other Disbursements.....	0.00	17000.00	
30. Federal Election Activity (2 U.S.C 431(20))			
(a) Shared Federal Election Activity (from Schedule H6)			
(i) Federal Share	0.00	0.00	
(ii) "Levin" Share	0.00	0.00	
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00	
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00	
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8745.88	212100.51	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8745.88	212100.51	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	36250.00	122681.50
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36250.00	122681.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	8745.88	135100.51
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	8745.88	135100.51

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 / 15

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
AMERICAN ASSN. OF NURSE ANESTHETISTS PA
Mailing Address 412 FIRST ST, SE, STE 12

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00173153

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 1 / 2 0 0 9

Transaction ID: 90914.C2449

Amount of Each Receipt this Period

2500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
AMERICAN OPTOMETRIC ASSN - AOP PAC
Mailing Address 1505 PRINCE ST, STE 300

City State Zip Code
ALEXANDRIA VA 22314

FEC ID number of contributing
federal political committee.

C C00024968

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 0 1 / 2 0 0 9

Transaction ID: 90914.C2450

Amount of Each Receipt this Period

5000.00

Receipt

C.

Full Name (Last, First, Middle Initial)
APMA PODIATRY PAC
Mailing Address 9312 OLD GEORGETOWN RD

City State Zip Code
BETHESDA MD 20814-1621

FEC ID number of contributing
federal political committee.

C C00008839

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: 91019.C2459

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

10000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 15

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)
DEALERS ELECTION ACTION COMMITTEE

Mailing Address 8400 WESTPARK DR

City State Zip Code
MC LEAN VA 22102

FEC ID number of contributing federal political committee.

C C00040998

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: 91019.C2457

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)
MEDASSETS PAC

Mailing Address 200 N. POINT CENTER E, STE 600

City State Zip Code
ALPHARETTA GA 30022

FEC ID number of contributing federal political committee.

C C00458380

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: 91019.C2455

Amount of Each Receipt this Period

1250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
MEDASSETS PAC

Mailing Address 200 N. POINT CENTER E, STE 600

City State Zip Code
ALPHARETTA GA 30022

FEC ID number of contributing federal political committee.

C C00458380

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: 91019.C2454

Amount of Each Receipt this Period

1250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶

7500.00

TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 15

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

NOVARTIS PAC

Mailing Address 701 PENNSYLVANIA AVE, NW, STE 725

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C

C00033969

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 1 / 2 0 0 9

Transaction ID: 90914.C2451

Amount of Each Receipt this Period

5000.00

Receipt

B.

Full Name (Last, First, Middle Initial)

PREMIER EMPLOYEES CIVIC ACTION FUND

Mailing Address 444 N. CAPITOL ST, NW, STE 625

City

WASHINGTON

State

DC

Zip Code

20001-1511

FEC ID number of contributing
federal political committee.

C

C00346288

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 0 9 / 2 0 0 9

Transaction ID: 90914.C2452

Amount of Each Receipt this Period

2500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

7500.00

TOTAL This Period (last page this line number only)

25000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

PAUL F. CAMBON

Mailing Address 908 CROTON DR

City

ALEXANDRIA

State

VA

Zip Code

22308

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE LIVINGSTON GROUP, LLC

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 9

Transaction ID: 91019.C2460

Amount of Each Receipt this Period

750.00

Receipt

B.

Full Name (Last, First, Middle Initial)

MARTIN CACIENNE

Mailing Address P. O. BOX 36

City

BELLE ROSE

State

LA

Zip Code

70341

FEC ID number of contributing
federal political committee.

C

Name of Employer

THE LIVINGSTON GROUP, LLC

Occupation

EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 9

Transaction ID: 91019.C2461

Amount of Each Receipt this Period

500.00

Receipt

C.

Full Name (Last, First, Middle Initial)

WENDELL G. DAVIS

Mailing Address 53 CONGRESS DR

City

AMSTON

State

CT

Zip Code

06231

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 9

Transaction ID: 91019.C2462

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

1750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)
MELVIN G. GOODWEATHER

Mailing Address 820 EMERALD DR

City State Zip Code
ALEXANDRIA VA 22308-2622

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE LIVINGSTON GROUP, LLC

Occupation
EXECUTIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 9

Transaction ID: 91019.C2463

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
BRYCE L. HARLOW

Mailing Address 1812 SOLITAIRE LN

City State Zip Code
MC LEAN VA 22101-4200

FEC ID number of contributing
federal political committee.

C

Name of Employer
Timmons & Company

Occupation
PRESIDENT & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 9

Transaction ID: 91019.C2464

Amount of Each Receipt this Period

1500.00

Receipt

C.

Full Name (Last, First, Middle Initial)
STEPHEN G. KOTFLA

Mailing Address 44 SHATTUCK RD

City State Zip Code
HADLEY MA 01035-9438

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOWER ACQUISITION LLC

Occupation
VICE PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 9

Transaction ID: 91019.C2465

Amount of Each Receipt this Period

1000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

2750.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

WILLIAM R. LARKIN

Mailing Address 274 S. RILROAD ST

City

STATEN ISLAND

State

NY

Zip Code

10312

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: 91019.C2458

Amount of Each Receipt this Period

250.00

Receipt

B.

Full Name (Last, First, Middle Initial)

MICHAEL MATTHEWS

Mailing Address 6 FILOMENA DR

City

PITTSFIELD

State

MA

Zip Code

01201

FEC ID number of contributing
federal political committee.

C

Name of Employer
TOWER ACQUISITION LLC

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 4 / 2 0 0 9

Transaction ID: 91019.C2466

Amount of Each Receipt this Period

1000.00

Receipt

C.

Full Name (Last, First, Middle Initial)

THOMAS SMITH

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer
PRESCOTT INVESTORS, INC.

Occupation

INVESTOR

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 9 / 2 2 / 2 0 0 9

Transaction ID: 91019.C2453

Amount of Each Receipt this Period

5000.00

Receipt

SUBTOTAL of Receipts This Page (optional)

6250.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 15

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ORRINPAC

A.

Full Name (Last, First, Middle Initial)

DARRELL WEATHERFORD

Mailing Address 621 W. BARRY AVE, #504

City

CHICAGO

State

IL

Zip Code

60657

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information Requested

Occupation

Information Requested

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 3 / 2 0 0 9

Transaction ID: 91019.C2456

Amount of Each Receipt this Period

500.00

Receipt

SUBTOTAL of Receipts This Page (optional)

500.00

TOTAL This Period (last page this line number only)

11250.00

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 13 / 15

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)
 ORRINPAC

A. Full Name (Last, First, Middle Initial) Autumn E-Media Mailing Address PO Box 371553	Transaction ID: 91019.E2019 Date of Disbursement <div> <div>09</div> <div>14</div> <div>2009</div> </div>
City LAS VEGAS State NV Zip Code 89137- Purpose of Disbursement Pac consulting Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Amount of Each Disbursement this Period <div>530.72</div> PAC CONSULTING
B. Full Name (Last, First, Middle Initial) CBIZ MHM, LLC Mailing Address 175 SOUTH WEST TEMPLE, SUITE 650 City SALT LAKE CITY State UT Zip Code 84101- Purpose of Disbursement Accounting fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E2020 Date of Disbursement <div> <div>09</div> <div>14</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>1661.84</div> ACCOUNTING FEES
C. Full Name (Last, First, Middle Initial) FLAT CREEK MANAGEMENT Mailing Address 211 SEVENTH AVENUE NORTH SUITE LL-15 City NASHVILLE State TN Zip Code 37219- Purpose of Disbursement Online merchant fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 91019.E2026 Date of Disbursement <div> <div>09</div> <div>22</div> <div>2009</div> </div> Amount of Each Disbursement this Period <div>337.85</div> ONLINE MERCHANT FEE

SUBTOTAL of Disbursements This Page (optional) ►

2530.41

TOTAL This Period (last page this line number only) ►

SCHEDULE B (FEC Form 3X) **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 14 / 15

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
NATIONAL POLITICAL ASSOCIATES

Mailing Address P.O. BOX 2204

City WASHINGTON State DC Zip Code 20013-

Purpose of Disbursement
Pac consulting

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E2021

Date of Disbursement

09 / 17 / 2009

Amount of Each Disbursement this Period

4000.00

PAC CONSULTING

B.

Full Name (Last, First, Middle Initial)
North Capitol Street Enterprises

Mailing Address 400 North Capitol Street, NW
Suite 585

City WASHINGTON State DC Zip Code 20001-

Purpose of Disbursement
Office rent and phone

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E2022

Date of Disbursement

09 / 14 / 2009

Amount of Each Disbursement this Period

896.15

OFFICE RENT AND PHONE

C.

Full Name (Last, First, Middle Initial)
OCTOBER, INC.

Mailing Address 11445 DIVELY AVENUE

City LAS VEGAS State NV Zip Code 89138-

Purpose of Disbursement
Email & website management

Candidate Name

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E2023

Date of Disbursement

09 / 14 / 2009

Amount of Each Disbursement this Period

964.00

EMAIL & WEBSITE MANAGEMENT

SUBTOTAL of Disbursements This Page (optional)

5860.15

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 15 / 15

<input checked="checked" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
ORRINPAC

A.

Full Name (Last, First, Middle Initial)
RootsHQ, LLCMailing Address 211 7th Avenue North
Suite LL-15

City NASHVILLE State TN Zip Code 37219-

Purpose of Disbursement
Pac consulting

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E2024

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 1 4 / 2 0 0 9

Amount of Each Disbursement this Period

311.37

PAC CONSULTING

B.

Full Name (Last, First, Middle Initial)
ZIONS BANK

Mailing Address 310 SOUTH MAIN ST

City SALT LAKE CITY State UT Zip Code 84101-

Purpose of Disbursement
Merchant fees

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: 91019.E2025

Date of Disbursement

M M / D D / Y Y Y Y
0 9 / 3 0 / 2 0 0 9

Amount of Each Disbursement this Period

43.95

MERCHANT FEES

SUBTOTAL of Disbursements This Page (optional)

355.32

TOTAL This Period (last page this line number only)

8745.88